



UNIFIED PROGRAM CONSOLIDATED FORM

ANAHEIM FIRE & RESCUE HAZARDOUS MATERIALS SECTION

201 S. ANAHEIM BOULEVARD, SUITE 300, ANAHEIM, CA 92805
PHONE: (714) 765-4040 FAX: (714) 765-4608

HAZARDOUS MATERIALS BUSINESS PLAN CERTIFICATION STATEMENT

Facility Name: Allied Pacific Metal Stamping Inc.

Address: 2951 E. La Palma Ave.

Phone: 714-630-8145

Hazardous Materials Inventory (one year certification)

The California Health & Safety Code, Division 20, Chapter 6.95, Section 25503.3(c) provides the following:

A business that handles/stores qualified hazardous materials shall review AND annually certify their hazardous materials inventory.

A business may comply with this reporting requirement by submitting this certification statement to Anaheim Fire & Rescue by March 1.

(Please check all applicable boxes)

☒ No changes are required.

☐ All changes have been made.

Changes have been made and have been submitted on a:
☐ Hazardous Materials Inventory form

A business may not utilize this certification to meet the annual inventory submission requirements of the Emergency Planning and Community Right to Know Act (Section 11022, Title 42, United States Code). A new Hazardous Materials Inventory form is required for any chemical subject to this act.

Consolidated Contingency/Emergency Plan (three year certification)

The California Health & Safety Code, Division 20, Chapter 6.95, Section 25505(c) provides the following:

A business that handles/stores qualified hazardous materials shall review AND certify all documents within their Hazardous Material Business Plan (HMBP) triennially (every three years).

A business may comply with this reporting requirement by submitting this certification statement to Anaheim Fire & Rescue by March 1.

(Please check all applicable boxes)

☒ No changes are required.

☐ All changes have been made.

Changes have been made and have been submitted on a:
☐ Business Owner/Operator Identification form
☐ Business Activities form
☐ Site Map
☐ Emergency Plan/Consolidated Contingency Plan

CERTIFICATION

As an authorized representative, I certify under penalty of law that I have personally examined the hazardous materials inventory and/or the Consolidated Contingency/Emergency Plan. I am familiar with the information submitted and believe the information is true, accurate and complete.

Signature: William John Whitaker

Date: 2-5-13

Print Name: WILLIAM JOHN WHITTAKER

Title: PRESIDENT

ENTERED

FEB 11 2013

TIDEMARK

J. Kaslowski

FEB 11 2013

OFFICE USE ONLY

REVIEWED BY: _____ REVIEWED DATE: _____